

MCMIS MOTOR CARRIER SAFETY PROFILE ORDER FORM

Follow the instructions on pages 17-18 of the "Catalog of MCMIS Reports" to properly complete this form

A. SPECIFY CARRIER INFORMATION

Please provide the following information for each carrier.

[If ordering more than one profile, provide information for the additional carriers on a separate sheet of paper.]

Specify Carrier Name: _____

Carrier Street Address: _____

Carrier City: _____ State: _____ Zip Code: _____

Carrier USDOT Number: _____ Carrier ICC Number: _____

[Carrier Profiles are available on paper only.]

B. PROVIDE YOUR MAILING ADDRESS

CONTACT NAME: _____

COMPANY NAME: _____

STREET: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE NUMBER: _____ DATE: _____

C. CALCULATE COST

COST OF CARRIER SAFETY PROFILE: \$27.50 (This is a non-refundable processing charge)

[Less Discount Based on Total Profiles Ordered & Shipped at the Same Time to a Single Location]

_____	X	\$27.50	\$ _____
# of Profiles		Cost	Initial Cost
15%	20%	25%	(_____)
2-6 Profiles	7-12 Profiles	13+ Profiles	Discount
AMOUNT OF CHECK		\$ _____	

[Make check payable to: Computing TechnologieS, Inc.]

D. SEND ORDER FORM AND CHECK TO:

COMputing TechnologieS, Inc.
OMC Data Dissemination Program
P.O. Box 3248
Merrifield, VA 22116-3248
(703) 280-4001